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|--|--|--------------------------|-----------------------|
| Effective on 12/08/2004.<br>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).<br><h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2009</h3> |  | <b>Complete if Known</b> |                       |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27   |  | Application Number       | 10/577,309-Conf #5180 |
| <b>TOTAL AMOUNT OF PAYMENT</b>   |  | Filing Date              | January 19, 2007      |
| (\$ ) <b>\$ 3,200.00</b>   |  | First Named Inventor     | Tatsuo ESAKI          |
|  |  | Examiner Name            | J. C. Langman         |
|  |  | Art Unit                 | 1794                  |
|  |  | Attorney Docket No.      | 1272-0124PUS1         |

|  |   |
|--|---|
| <b>METHOD OF PAYMENT (check all that apply)</b>  |   |
| <input type="checkbox"/> Check   | <input type="checkbox"/> Credit Card  |
| <input type="checkbox"/> Money Order   | <input type="checkbox"/> None   |
| <input type="checkbox"/> Other (please identify):  |   |
| <input checked="" type="checkbox"/> Deposit Account  | Deposit Account Number: 02-2448   |
| Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP   |   |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)                 |   |
| <input checked="" type="checkbox"/> Charge fee(s) indicated below  | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | <input type="checkbox"/> Credit any overpayments                                  |

| <b>FEE CALCULATION</b>                               |             |                       |             |                       |                  |                       |                |
|--|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
| <b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b> |             |                       |             |                       |                  |                       |                |
| Application Type                                     | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$) |
|  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
| Utility  | 330         | 165                   | 540         | 270                   | 220              | 110                   |                |
| Design   | 220         | 110                   | 100         | 50                    | 140              | 70                    |                |
| Plant  | 220         | 110                   | 330         | 165                   | 170              | 85                    |                |
| Reissue  | 330         | 165                   | 540         | 270                   | 650              | 325                   |                |
| Provisional  | 220         | 110                   | 0           | 0                     | 0                | 0                     |                |

| <b>2. EXCESS CLAIM FEES</b>                        |                       |
|--|-----------------------|
| Fee Description                                    | Small Entity Fee (\$) |
| Each claim over 20 (including Reissues)            | 52 26                 |
| Each independent claim over 3 (including Reissues) | 220 110               |
| Multiple dependent claims                          | 390 195               |

| Total Claims   | Extra Claims | Fee (\$) | Fee Paid (\$) | Multiple Dependent Claims |
|--|--------------|----------|---------------|---------------------------|
| 4  | - 20 or HP   | 0        | 52.00         | 0.00                      |
| HP = highest number of total claims paid for, if greater than 20.      |              |          |               |                           |
| Indep. Claims  | Extra Claims | Fee (\$) | Fee Paid (\$) |                           |
| 2  | - 3 or HP    | 0        | 220.00        | 0.00                      |
| HP = highest number of independent claims paid for, if greater than 3. |              |          |               |                           |

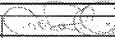
  

| <b>3. APPLICATION SIZE FEE</b>  |              |  |          |
|---|--------------|--|----------|
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |              |  |          |
| Total Sheets  | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) |
| - 100 =   | /50 =        | (round up to a whole number) x                   |          |

|   |                 |
|---|-----------------|
| <b>4. OTHER FEE(S)</b>  |                 |
| 1806 Submission of Information Disclosure Statement                                 | Fees Paid (\$): |
| Other (e.g., late filing surcharge): 1251 Extension for response within first month | 130.00          |

|  |   |                           |  |
|--|---|---------------------------|--|
| <b>SUBMITTED BY</b>  |   |                           |  |
| Signature:  | Registration No. (Attorney/Agent): 42,874 | Telephone: (703) 205-8000 |  |
| Name (Print Type): Craig A. McRobbie   | Date: April 10, 2009                      |                           |  |